



League of United Latin American Citizens
LULAC Council #10, P.O. BOX 4616, Davenport, IA 52808-4616

APPLICATION FOR LULAC FIESTA QUEEN

Date _____

Last Name _____ Middle Initial _____ **First Name** _____

Address _____ City _____ State ____ Zip _____
Phone _____ E-MAIL _____

Birth date _____ School currently attended _____

Last Grade completed _____ Overall GPA _____

Parent or Legal Guardian Information

Father's Last Name _____ **First Name** _____
Phone _____ E-MAIL _____

Address _____ City _____ State ____ Zip _____

Mother's Last Name _____ **First Name** _____
Phone _____ E-MAIL _____

Address _____ City _____ State ____ Zip _____

Please list any activities, hobbies, and volunteer work. Personal interests, certificates and or any special skills that may qualify you for the candidacy, use back if needed.

I hereby certify that all statements in this application are true. I understand that if any of the above statements are untrue, this application may be rejected and may cause any prizes to be rescinded, I hereby authorize LULAC to contact any of the institutions to verify school and reference records.

Furthermore, understand that with the Queen pageant I will be required to obey and follow all rules and regulations of the pageant, failure to do so will result in dismissal.

Signature of applicant _____ Date _____

If under the age of 18 Parents Signature _____ Date _____